

**IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO (AKRON)**

| | | |
|---------------------------|---|-------------------------------------|
| MALIBU MEDIA, LLC, |) | CASE NO.: 5:14-cv-02759-SL |
| |) | |
| Plaintiff, |) | |
| |) | |
| vs. |) | JUDGE SARA LIOI |
| |) | |
| |) | MAGISTRATE JUDGE KATHLEEN B. |
| MICHAEL BOWSER, |) | BURKE |
| |) | |
| Defendant. |) | |
| |) | |
| |) | |

NOTICE OF SUGGESTION OF DEATH

I. INTRODUCTION

The Plaintiff only sued Michael Bowser in this case as but the Time Warner account belonged to his late mother, as did the home.

The Plaintiff has no evidence that Michael Bowser was the individual responsible for any alleged copyright violations.

Mrs. Bowser unfortunately passed away recently. A copy of that death certificate is attached hereto as Exhibit A.

The Plaintiff filed an action against the owner of the Time Warner account but did not bring the case against the correct party to begin with, which is one of our affirmative defenses and probably would have been a basis for a Motion to Dismiss, the Plaintiff's claim is against the Time Warner account holder only and that claim should be in Probate Court when, and if, the

estate is ever opened.

II. CONCLUSION

WHEREFORE, the undersigned counsel on behalf of the Defendant, Michael Bowser, respectfully gives notice of his mother's passing.

Respectfully submitted,

MICHAEL P. HARVEY CO., L.P.A.

/s/Michael P. Harvey

Michael P. Harvey, Esq. (#0039369)

311 Northcliff Drive

Rocky River, Ohio 44116

Office: (440) 356-9108

Cell: (440) 570-2812

Email: MPHArveyCo@aol.com

Attorney for Defendant

CERTIFICATE OF SERVICE

The undersigned hereby certifies that on August 3, 2015 a copy of the foregoing NOTICE OF SUGGESTION OF DEATH has been forwarded via the Court's electronic filing system to:

Yousef M. Faroniya

84 South 4th Street

Columbus, OH 43215

(614) 360-1855

Email: yfaroniya@gmail.com

Attorney for Plaintiff

/s/Michael P. Harvey

Michael P. Harvey, Esq.

Attorney for Defendant

MPH/rlb

07/24/2015 12:46PM 3308752931

PAGE 02/02

| Reg. Dist. No. 18 | | Ohio Department of Health | | VITAL STATISTICS | | State File No. 2015060901 | |
|---|--|---|--|---|--|---|--|
| Primary Reg. Dist. No. 1801 | | CERTIFICATE OF DEATH | | Type or name to permanent blue or black ink | | | |
| Registrar's No. 2015-007068 | | | | | | | |
| 1. Decedent's Legal Name (include AKA's if any) (First Middle, LAST, initial) | | | | 2. Sex | | 3. Date of Death (Mo/Day/Year) | |
| JUNE D BOWSER | | | | FEMALE | | JUNE 28, 2015 | |
| 4. Social Security Number | | 5a. Age (Years) | | 5b. Under 1 Year | | 5c. Under 1 day | |
| 289-28-8552 | | 65 | | | | | |
| 6. Date of Birth (Mo/Day/Year) | | 7. Birthplace (City and State or Foreign Country) | | | | | |
| JANUARY 22, 1952 | | CLEVELAND, OHIO | | | | | |
| 8a. Residence State | | 8b. County | | 9c. City or Town | | 9d. Zip Code | |
| OHIO | | MEDINA | | GRANGER TOWNSHIP | | 44258 | |
| 10a. Street and Number | | 10b. Apt. No. | | 10c. Outside City Limits? | | | |
| 446 ROCKY HOLLOW DRIVE | | | | NO | | | |
| 11. Decedent's Education | | 12. Decedent of Hispanic Origin | | 13. Decedent's Race | | | |
| HIGH SCHOOL GRADUATE OR GED | | NO | | WHITE | | | |
| 14. Father's Name | | 15. Mother's Name (prior to first marriage) | | 16. Relationship to Decedent | | 17c. Mailing Address (Street and Number, City, State, Zip Code) | |
| HENRY LAURICH | | EMILY KANDUS | | DAUGHTER | | 1160 S. MEDINA LINE ROAD | |
| 17a. Informant's Name | | 17b. Informant's Address | | 17c. Informant's Phone | | 17d. Informant's Signature | |
| VALERIE ZAREMBA | | | | | | | |
| 18a. Place of Death | | 18b. City or Town, State and Zip Code | | 18c. Country of Death | | | |
| HOSPITAL - INPATIENT | | CLEVELAND, OH 44195 | | CUYAHOGA | | | |
| 19a. Facility Name (if not institution, give street & number) | | 19b. City or Town, State and Zip Code | | 19c. Country of Death | | | |
| CLEVELAND CLINIC FOUNDATION | | CLEVELAND, OH 44195 | | CUYAHOGA | | | |
| 20a. Name and Complete Address of Funeral Facility | | 20b. City or Town, State and Zip Code | | 20c. Country of Death | | | |
| HERITAGE CREMATION SOCIETY | | 303 S. CHAPEL STREET | | LOUISVILLE, OH 44641 | | | |
| 21. Name and Complete Address of Funeral Facility | | 21b. City or Town, State and Zip Code | | 21c. Country of Death | | | |
| HERITAGE CREMATION SOCIETY | | 303 S. CHAPEL STREET | | LOUISVILLE, OH 44641 | | | |
| 22. Date of Disposition | | 22b. Date of Disposition | | 22c. Date of Disposition | | | |
| 7-6-15 | | 7-6-15 | | 7-6-15 | | | |
| 23. Name and Complete Address of Funeral Facility | | 23b. City or Town, State and Zip Code | | 23c. Country of Death | | | |
| HERITAGE CREMATION SOCIETY | | 303 S. CHAPEL STREET | | LOUISVILLE, OH 44641 | | | |
| 24. Date of Death | | 24b. Date of Death | | 24c. Date of Death | | | |
| JUL 7 2015 | | JUL 7 2015 | | JUL 7 2015 | | | |
| 25. Name of Person Issuing Disposition Permit | | 25b. Date of Disposition | | 25c. Date of Disposition | | | |
| FALK JOHN | | 7-6-15 | | 7-6-15 | | | |
| 26. Date of Death | | 26b. Date of Death | | 26c. Date of Death | | | |
| JUL 7 2015 | | JUL 7 2015 | | JUL 7 2015 | | | |
| 27. Name (Last, First, Middle) and Address of Person who Completed Cause of Death | | 27b. City or Town, State and Zip Code | | 27c. Country of Death | | | |
| HOEKSEMA, LAURA J, 9500 EUCLID AVENUE CLEVELAND, OH 44195 | | CLEVELAND, OH 44195 | | CUYAHOGA | | | |
| 28. Part I. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, which, or both, result in death. | | 28b. Date of Death | | 28c. Date of Death | | | |
| congestive heart failure | | JUL 7 2015 | | JUL 7 2015 | | | |
| 29. Part II. Enter the disease, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, which, or both, result in death. | | 29b. Date of Death | | 29c. Date of Death | | | |
| cardiac fibrillation, hypertension | | JUL 7 2015 | | JUL 7 2015 | | | |
| 30. Was an Autopsy Performed? | | 30b. Date of Death | | 30c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 31. Were Autopsy Findings Available (Prior to Completion of Cause of Death)? | | 31b. Date of Death | | 31c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 32. Was an Autopsy Performed? | | 32b. Date of Death | | 32c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 33. Was an Autopsy Performed? | | 33b. Date of Death | | 33c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 34. Was an Autopsy Performed? | | 34b. Date of Death | | 34c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 35. Was an Autopsy Performed? | | 35b. Date of Death | | 35c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 36. Was an Autopsy Performed? | | 36b. Date of Death | | 36c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 37. Was an Autopsy Performed? | | 37b. Date of Death | | 37c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 38. Was an Autopsy Performed? | | 38b. Date of Death | | 38c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 39. Was an Autopsy Performed? | | 39b. Date of Death | | 39c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 40. Was an Autopsy Performed? | | 40b. Date of Death | | 40c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 41. Was an Autopsy Performed? | | 41b. Date of Death | | 41c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 42. Was an Autopsy Performed? | | 42b. Date of Death | | 42c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 43. Was an Autopsy Performed? | | 43b. Date of Death | | 43c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 44. Was an Autopsy Performed? | | 44b. Date of Death | | 44c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 45. Was an Autopsy Performed? | | 45b. Date of Death | | 45c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 46. Was an Autopsy Performed? | | 46b. Date of Death | | 46c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 47. Was an Autopsy Performed? | | 47b. Date of Death | | 47c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 48. Was an Autopsy Performed? | | 48b. Date of Death | | 48c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 49. Was an Autopsy Performed? | | 49b. Date of Death | | 49c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 50. Was an Autopsy Performed? | | 50b. Date of Death | | 50c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 51. Was an Autopsy Performed? | | 51b. Date of Death | | 51c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 52. Was an Autopsy Performed? | | 52b. Date of Death | | 52c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 53. Was an Autopsy Performed? | | 53b. Date of Death | | 53c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 54. Was an Autopsy Performed? | | 54b. Date of Death | | 54c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 55. Was an Autopsy Performed? | | 55b. Date of Death | | 55c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 56. Was an Autopsy Performed? | | 56b. Date of Death | | 56c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 57. Was an Autopsy Performed? | | 57b. Date of Death | | 57c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 58. Was an Autopsy Performed? | | 58b. Date of Death | | 58c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 59. Was an Autopsy Performed? | | 59b. Date of Death | | 59c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 60. Was an Autopsy Performed? | | 60b. Date of Death | | 60c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 61. Was an Autopsy Performed? | | 61b. Date of Death | | 61c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 62. Was an Autopsy Performed? | | 62b. Date of Death | | 62c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 63. Was an Autopsy Performed? | | 63b. Date of Death | | 63c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 64. Was an Autopsy Performed? | | 64b. Date of Death | | 64c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 65. Was an Autopsy Performed? | | 65b. Date of Death | | 65c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 66. Was an Autopsy Performed? | | 66b. Date of Death | | 66c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 67. Was an Autopsy Performed? | | 67b. Date of Death | | 67c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 68. Was an Autopsy Performed? | | 68b. Date of Death | | 68c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 69. Was an Autopsy Performed? | | 69b. Date of Death | | 69c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 70. Was an Autopsy Performed? | | 70b. Date of Death | | 70c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 71. Was an Autopsy Performed? | | 71b. Date of Death | | 71c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 72. Was an Autopsy Performed? | | 72b. Date of Death | | 72c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 73. Was an Autopsy Performed? | | 73b. Date of Death | | 73c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 74. Was an Autopsy Performed? | | 74b. Date of Death | | 74c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 75. Was an Autopsy Performed? | | 75b. Date of Death | | 75c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 76. Was an Autopsy Performed? | | 76b. Date of Death | | 76c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 77. Was an Autopsy Performed? | | 77b. Date of Death | | 77c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 78. Was an Autopsy Performed? | | 78b. Date of Death | | 78c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 79. Was an Autopsy Performed? | | 79b. Date of Death | | 79c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 80. Was an Autopsy Performed? | | 80b. Date of Death | | 80c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 81. Was an Autopsy Performed? | | 81b. Date of Death | | 81c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 82. Was an Autopsy Performed? | | 82b. Date of Death | | 82c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 83. Was an Autopsy Performed? | | 83b. Date of Death | | 83c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 84. Was an Autopsy Performed? | | 84b. Date of Death | | 84c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 85. Was an Autopsy Performed? | | 85b. Date of Death | | 85c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 86. Was an Autopsy Performed? | | 86b. Date of Death | | 86c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 87. Was an Autopsy Performed? | | 87b. Date of Death | | 87c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 88. Was an Autopsy Performed? | | 88b. Date of Death | | 88c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 89. Was an Autopsy Performed? | | 89b. Date of Death | | 89c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 90. Was an Autopsy Performed? | | 90b. Date of Death | | 90c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 91. Was an Autopsy Performed? | | 91b. Date of Death | | 91c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 92. Was an Autopsy Performed? | | 92b. Date of Death | | 92c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 93. Was an Autopsy Performed? | | 93b. Date of Death | | 93c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 94. Was an Autopsy Performed? | | 94b. Date of Death | | 94c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 95. Was an Autopsy Performed? | | 95b. Date of Death | | 95c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 96. Was an Autopsy Performed? | | 96b. Date of Death | | 96c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 97. Was an Autopsy Performed? | | 97b. Date of Death | | 97c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 98. Was an Autopsy Performed? | | 98b. Date of Death | | 98c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 99. Was an Autopsy Performed? | | 99b. Date of Death | | 99c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |
| 100. Was an Autopsy Performed? | | 100b. Date of Death | | 100c. Date of Death | | | |
| No | | JUL 7 2015 | | JUL 7 2015 | | | |

I HEREBY CERTIFY THIS DOCUMENT IS AN EXACT COPY OF THE RECORD ON FILE WITH THE OHIO DEPARTMENT OF HEALTH.

JUL - 715 066015

Mary E. Black
MORRIS A. BLACK, LOCAL REGISTRAR
OHIO DEPARTMENT OF HEALTH
WITH SIGNATURE & SEAL